MINUTES
Standardization Committee Meeting
Friday, October 8, 2004

Balog, Stephen, RN, DASS
Brown, Dennis, RRT, CCMD
Fahey, Barbara, RN, MMD
Goldspiel, Barry, RPh, Pharmacy
Hopkins, Julie, RN, DTM
Johnson, Sue, RN, Nursing
Eldridge, Lawrence, Chair, OD
Lloyd, Margaret, RN, Nursing
Martinez, Brenda, RN, Nursing
Ram, David, Biomed, MMD
Rowe, Gina, RN, OD
Taylor, Jerry, RN, MMD
White, Maggi, MT, HES

GUEST
Jim Nichols, RN, NHLBI

NEW COMMITTEE MEMBER
Mr. Eldridge introduced Julie Hopkins, RN, DTM as a new member of the Standardization Committee. Ms. Hopkins is DTM Nurse Manager.

Approval of September 10, 2004 Minutes
A motion was made, seconded and approved to accept the minutes as written.

COST IMPLICATION REPORTS
As an FYI, cost implication reports were circulated for two new items—a BD vacutainer tube for an Epstein Barr Virus PCR test and an angiography drape with window.

OLD BUSINESS

AUTODROP
Ms. Fahey noted that at the May 2004 meeting, Committee approval was requested for Autodrop, a device used by NEI. The Committee deferred approval pending further information on two questions—was the device latex-free and was the device suitable for both adult and pediatric eyedrop medication containers. Ms. Fahey circulated documentation that Autodop is latex-free. Ms. Fahey informed that Committee that, Dr. Dahr, NTI, eye drops are dispensed for pediatric and adults in the same size container. Thus Autodrop fits over adults and infants and children eye drop containers. Subsequent to discussion and a recommendation to emphasize in the Product Update the need to read and carefully follow the product information insert that is included with each Autodrop, a motion was made, seconded and approved for Autodrop to be added into MMD inventory.

DRAINDUO – 2JP POUCHES WITH SECURITY HINGES/BELT
This item was deferred to a future meeting.

NEW BUSINESS

DESFEROL THERAPY PROTOCOL
Mr. Nichols informed the Committee that NHLBI has six active protocols that utilize chelation therapy using desferol. A very small volume is infused over 6—8 hours—none of the available CC infusion pumps met criteria for safe and accurate desferol administration. A simple and reliable battery-operated system was identified—the Graseby Syringe Driver. Subsequent to consultation with MMD and Biomed, CCMD purchased ten syringe drivers. Upon delivery of the drivers, Biomed verified all pumps were operating within normal

parameters. Mr. Nichols noted that 6—10 patients currently need this therapy. It is being administered without problems on 7E, 10D and also when patients are at home. The Committee thanked Mr. Nichols for his report.

BD 1/2ML TB SYRINGES

Ms. Taylor reported that availability of a ½ ml syringe was needed. Ms. Woolery had informed Ms. Taylor of medication errors, calculation errors and dead space errors that could have been prevented by availability of a ½ ml syringe. A BD ½ ml TB syringe was successfully evaluated on 9W, 13W and Clinic 13. During the evaluation the ½ ml syringe was used this for skin testing, hydrocortisone and GCFF. Ms. Taylor noted that the dead space error is not an issue with the ½ ml syringe because the needle is permanently attached. Ms. Taylor stated that the ½ ml syringe can be used for safe and accurate administration of ½ ml or smaller doses. Ms. Taylor cautioned that this syringe is not an insulin syringe and should not be used as an insulin syringe. A motion was made, seconded and approved for the ½ ml TB syringe to be added into MMD inventory.

TAKE-HOME DRESSING KIT & NEW TAKE-HOME DRESSING KIT FOR NEWLY DIAGNOSED PATIENTS

Ms. Taylor requested Committee approval for component additions to the CHS custom-assembled Take Home Dressing Kit/New Take Home Dressing Kit for Newly Diagnosed Patients. The additions are: green occluding forcept—this is for emergency use, Aquaguard barrier 7 x 7—enough quantity for the patient to bathe daily); Interlink injection cap—quantity to be determined. The Committee noted that since all three items were already a part of MMD regular inventory, Committee approval was not necessary. The Committee agreed that the changes were reasonable and referred the request to Standardization Committee CPC Liaison for management.

REPLACEMENT YELLOW ISOLATION GOWN

Ms. Taylor reported that manufacture of the current yellow isolation gown was discontinued. Ms. Taylor displayed the replacement yellow isolation gown. The replacement is latex-free and meets AAMI standard Category Four for barrier performance of protective apparel. Category Four barriers demonstrate ability to resist liquid penetration. The Committee noted that the replacement gown is very similar to the discontinued gown, and stated that no Product Update/Information was indicated on this matter.

PRODUCT IMPLEMENTATION SUMMARY (10/2003 – 9/2004)

Ms. Fahey circulated the bi-annual report for each product and product service intensity category implemented for March 2004—September 2004 and the overall summary report from April 2003—September 2004. From March through September, 18 products were implemented—15 Category One, two were Category Two and one was Category Three. No major implementation problems were identified. This report is developed per the Committee's Product Implementation Process, approved April 2003.

CARE SENSE CHAIR MONITORING SYSTEM EVALUATION (STARTED 9/03):

Ms. Fahey reported that the Care Sense Monitor—a device that can be used to alert staff that a patient has shifted weight and may be in danger of falling—was used one time in 2003. An evaluation was initiated. Since September 2003, the Care Sense Monitor system has not been used. Ms. Fahey suggested that this evaluation be completed, and the system be maintained in the event of future clinical indication. The Committee agreed with this recommendation.

Ms. Price requested a copy of the evaluation materials. Ms. Fahey stated that a copy would be sent to Ms. Price.

BARD CRITICORE MONITOR

Ms. Fahey informed the Committee that the Bard CritiCore Monitor System is being implemented in the CC in order to be able to continuously monitor core body temperature for ICU patients on CVVH and for patients participating in a newly approved NCI protocol. At present, ICU has no consistent means to monitor core body temperature for patients on CVVH. The newly approved NCI protocol entails administration of a heat-sensitive chemotherapy agent for which constant monitoring of core body temperature during administration is crucial; administration begin in Special Procedures and completes on the ICU. The CritiCore Monitor System will be used only in the ICU and in Special Procedures. In-services will be provided for special procedure in 10D, 2J, when the monitors are on board.

SALEM SUMP EVALUATION

Ms. Taylor reported that current Salem Sump will not be replaced. Evaluation of a replacement silicone-based sump was not successful—the silicon-based device was too pliable. Another candidate product has been identified for evaluation, and evaluation will occur during 2005. The Committee will be kept informed on this project.

The meeting was adjourned.

Next Meeting
November 12, 2004 @ 10:00 AM—*NOTE TIME CHANGE!*